# 2018 Houston Ball Association Contract and Parental Authorization Form

I do hereby agree to cooperate fully with the commissioners and coaches of the Houston Ball Association and to play baseball or softball for the aforementioned teams to the best of my ability. Participants in the Houston Ball Association are not covered by medical or accident insurance. Each participant is encouraged to carry his/her own personal coverage during the practice and playing season.

Please Print

	ALLEY ALTONOMY OF THE STATE OF	VACCO		Bov	or Girl	
Name of Player			Current Grade		Circle One	
				Yes	No	
Printed Parent/Guardian Name		<del></del>	Telephone Number		Texting OK?	
				Yes	No	
Email Address		Alternate Phone		ting OK?		
ability Waiver:						
ason. We assume all risks tivities and we do hold han nancial supporters, umpire ising out of injury to our so hen received, except for no	rmless the local associons, managers, coaches and or daughter. We ag	ation, the organizers of t and person transporting	ne league, the uniform s our son or daughter to a	sponsors, supervisors, and from the activities	commission for any clair	
Parent or Guardian Sig	gnature		Date			
ease Circle T-Shirt Siz	e: Note: Youth	shirts tend to run sr	nall			
Youth Sizes:	Small (6/8)	Medium (10/12)	Large (14/16)			
Adult Sizes:	Small	Medium	Large	X-Large		
olunteer to Coach:						
olunteer coaches and assisted a coach or assistant coach		15). 15)	19,50	30 0.50	g to voluntee	
Coach: Assista	nt Coach: Printe	d Name:		Shirt Size:		
Please return the for	ollowing 3 items to the	school office by <b>Thursda</b>	ıy, March 15 <sup>th</sup> :			
o This Sign-L	Jp Form					
o Lindsay's L	aw Parent/Athlete Sig	nature Form *Please visi	t the link on our school v	website for more info	rmation*	
o League Fee	e Payment (Checks Pay	yable to: <b>Houston Ball As</b>	sociation) *See back fo	r league details and fe	ees*	
Due to T-shirt order	rs, no refunds will be is	ssued.				
All teams will have a help is greatly appread		oncession stand. You wi	ll receive an email from	the Sign Up Genius w	ebsite. You	

For questions, please contact the following people: Steve Mowery at 937-492-6879 or <a href="mailto:yrewom00@hotmail.com">yrewom00@hotmail.com</a> (boys)

Brian & Jen Crim at 937-498-4060 or <a href="mailto:bcrim@roadrunner.com">bcrim@roadrunner.com</a> (girls)

# 2018 Houston Ball Association – Official Sign-ups

#### T-Ball:

Boys & Girls Currently in Kindergarten and Pre-K (going into Kindergarten/Young Fives next year)

Approximately 6 games End of May – end of June \$25 fee includes shirt

#### G-Ball:

#### Grades 1-3 girls (Coach pitches to batters)

Approximately 9 games
Mid-May – end of June
All games played at Houston against other Houston teams
End of season tournament
\$35 fee includes shirt & team headband

#### Grades 1-2 boys (Pitching machine)

Approximately 9 games
Mid-May – end of June
All games played at Houston against other Houston teams
End of season tournament
\$35 fee includes shirt & hat

#### 4th/5th Girls Traveling Softball:

Approximately 10 games
End of May – mid-July
Games played at various fields within county
\$40 fee includes shirt and team headband

## 3<sup>rd</sup>/4<sup>th</sup> Boys Traveling Baseball:

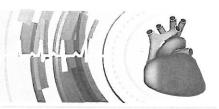
Approximately 8 home/8 away games Mid-May – mid-July \$40 fee includes shirt and hat

### 5<sup>th</sup>/6<sup>th</sup> Boys Traveling Baseball:

Approximately 8 home/8 away games Mid-May – mid-July \$40 fee includes shirt and hat

<sup>\*6</sup>th grade girls play in a summer league and will receive sign-up information from Mr. New at a later date

# Sudden Cardiac Arrest and Lindsay's Law Parent/Athlete Signature Form



What is Lindsay's Law? Lindsay's Law is about Sudden Cardiac Arrest (SCA) in youth athletes. It covers all athletes 19 years or younger who practice for or compete in athletic activities. Activities may be organized by a school or youth sports organization.

Which youth athletic activities are included in Lindsay's law?

- Athletics at all schools in Ohio (public and non-public)
- Any athletic contest or competition sponsored by or associated with a school
- All interscholastic athletics, including all practices, interschool practices and scrimmages
- All youth sports organizations
- All cheerleading and club sports, including noncompetitive cheerleading

What is SCA? SCA is when the heart stops beating suddenly and unexpectedly. This cuts off blood flow to the brain and other vital organs. People with SCA will die if not treated immediately. SCA can be caused by 1) a structural issue with the heart, OR 2) a heart electrical problem which controls the heartbeat, OR 3) a situation such as a person who is hit in the chest or a gets a heart infection.

What is a warning sign for SCA? If a family member died suddenly before age 50, or a family member has cardiomyopathy, long QT syndrome, Marfan syndrome or other rhythm problems of the heart.

What symptoms are a warning sign of SCA? A young athlete may have these things with exercise:

- · Chest pain/discomfort
- Unexplained fainting/near fainting or dizziness
- Unexplained tiredness, shortness of breath or difficulty breathing
- Unusually fast or racing heart beats

What happens if an athlete experiences syncope or fainting before, during or after a practice, scrimmage, or competitive play? The coach MUST remove the youth athlete from activity immediately. The youth athlete MUST be seen and cleared by a health care provider before returning to activity. This written clearance must be shared with a school or sports official.

What happens if an athlete experiences any other warning signs of SCA? The youth athlete should be seen by a health care professional.

Who can evaluate and clear youth athletes? A physician (MD or DO), a certified nurse practitioner, a clinical nurse specialist, certified nurse midwife. For school athletes, a physician's assistant or licensed athletic trainer may also clear a student. That person may refer the youth to another health care provider for further evaluation.

What is needed for the youth athlete to return to the activity? There must be clearance from the health care provider in writing. This must be given to the coach and school or sports official before return to activity.

All youth athletes and their parents/guardians must view the Ohio Department of Health (ODH) video about Sudden Cardiac Arrest, review the ODH SCA handout and then sign and return this form.

Parent/Guardian Signature	Student Signature
Parent/Guardian Name (Print)	Student Name (Print)
Date	Date



